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PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)		Docket Number (Optional) 2516.STS.CN	
Application Number 10/795,805		Filed March 8, 2004	
For TURBO SYSTEM AND METHOD OF INSTALLING			
Art Unit 3748		Examiner Thai Ba Trieu	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter appropriate fee below):			
		<u>Fee</u>	<u>Small Entity Fee</u>
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$120	\$60 \$_____
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$450	\$225 \$_____
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1020	\$510 \$ <u>510</u>
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1590	\$795 \$_____
<input type="checkbox"/>	Five Month (37 CFR 1.17(a)(5))	\$2160	\$1080 \$_____
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		02/24/2006 EFLORES 00000040 10795805	
<input type="checkbox"/> A check in the amount of the fee is enclosed.		01 FC:2253 510.00 DP	
<input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Directory is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>50-0881</u> . I have enclosed a duplicate copy of this sheet.			
I am the <input type="checkbox"/> applicant/inventor			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>40,567</u>			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
 Signature		<u>2-13-06</u> Date	
Frank W. Compagni _____ Typed or printed name		(801) 478-0071 _____ Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			

FEE TRANSMITTAL**for FY 2005**☒ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF
PAYMENT**

(\$)

610

Complete if Known

Application Number	10/795,805
Filing Date	March 8, 2004
First Named Inventor	Richard K. Squires
Examiner Name	Thai Ba Trieu
Art Unit	3748
Attorney Docket No.	2516.STS.CN

METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: **50-0881** Deposit Account Name: **Morriss O'Bryant Compagni, PC**
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3, or for Reissues, each independent claim more than in the original patent	200	100
Multiple Dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims
				Small Entity
-20 or HP=	X	:		Fee (\$)
HP= highest number of total claims paid for, if greater than 20				
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	
-3 or HP	X	:		
HP= highest number of independent claims paid for, if greater than 3				

3. APPLICATION SIZE FEE

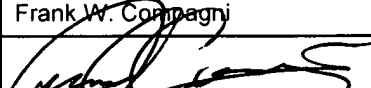
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35. U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s)

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100=	/50=	(round up to a whole number) x	:	

4. OTHER FEE(S)

Other:	Fee Paid (\$)
Extension of Time Petition (3 months)	\$510
Other:	

SUBMITTED BY

Name (Print/Type)	Frank W. Compagni	Registration No.	40,567	Telephone	(801) 478-0071
Signature				Date	2-13-06